P1600040310

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: BOE	Natur Corp	
DOCUMENT NUMBE	:R:_P1600004	0310	
The enclosed Articles of	Amendment and fee are su	abmitted for filing.	
Please return all corresp	ondence concerning this ma	itter to the following:	
	*	Frank Disz.	
_		Name of Contact Person	n
_	Boe	Malyon Co Firm/ Company	475
		Firm/ Company	
_	2238 _ Cady 3	31	
		Address	
	Hollyword	Cloude 2	3010
_		City/ State and Zip Cod	e
		\sim	
	FrankWI	S.CZTROUGHOO sed for future annual report	Com
	E-mail address: (to be us	sed for future annual report	notification)
For further information of	concerning this matter, pleas	se cali:	
Fra	1K Dig 7	at (917	de & Daytime Telephone Number
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made		
፟ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
<u>Mailir</u>	ng Address	Street	<u>Address</u>
	Iment Section	Ameno	Iment Section
	on of Corporations		on of Corporations

P.O. Box 6327 Tallahassee, Fl. 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

2018 NOV 26 PM 2: 14

(Simple of Ciriponia	tion as currently file	<u>:d with the Florida Der</u>	it. of State) ALLAHASSEE,
	P16000040310		MULAMASSEL.I
(Doct	iment Number of Cor	poration (if known)	
ursuant to the provisions of section 607.1006, Flori s Articles of Incorporation:	da Statutes, this <i>Flori</i>	ida Profit Corporation v	dopts the following amendment(s) to
. If amending name, enter the new name of the	corporation:		
ame must be distinguishable and contain the we Corp.," "Inc.," or Co.," or the designation "Cor ord "chartered," "professional association," or th	p." "Inc," or "Co".	A professional corpor	
. Enter new principal office address, if applicab Principal office address <u>MUST BE A STREET AD</u>			
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE B</u>	<u>ox</u>) _		
If amending the registered agent and/or registeness new registered agent and/or the new registered		n Florida, enter the na	me of the
Name of New Registered Agent			
	(Florida street aa	ldress)	
New Registered Office Address:	(City)		_, Florida (Zip Code)

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John De	<u>oe</u>		
X Remove	<u>V</u>	Mike Ju	<u>ones</u>		
X Add	<u>sv</u>	Sally Si	nith		
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s
1) X Change	<u> 4</u>		Frank	W D197	DOS Cody St
Add					Hollywood Fl
Remove					33090
2) Change		_			
Add					
Remove					
3) Change		_			
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change		_			
Add					
Remove					
(h					
6) Change		_			
Add					
Remove					

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the amer (if not applicable, indicate N/A)	endment if not contained in the amendment itself:

The date of each amendment(s) ado	otion:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Depa	ck does not meet the applicable statutory filing requirements, this dartment of State's records.	te will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes cast for the amendment(scient for approval.	.)
	ved by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):	nı
"The number of votes cust fo	the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adopt action was not required.	ed by the board of directors without shareholder action and shareholde	r
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators without shareholder action and shareholder	
Dated \\\	α / γ	
Signature	J. Lin	
	ctor, president or other officer - if directors or officers have not been	
	by an incorporator of fin the hands of a receiver, trustee, or other cour liduciary by that fiduciary)	Į.
	Frank Nicz.	
_	(Typed or printed name of person signing)	
_	President (Title of person signing)	
	(Title of person signing)	